

WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD  
N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.

ARIZONA STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS  
STANDARD CERTIFICATE OF BIRTH

State File No. 165 V  
Registered No. 231

1. PLACE OF BIRTH

County Gila State Arizona  
District or Township Lower Miami or Village   
City Miami No. Warrior Bldg St.  Ward   
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Stanley Martin Abbott  
(If child is not yet named, make supplemental report, as directed.)

3. Sex of Child male To be answered ONLY in event of plural births. 4. Twin, triplet or other  5. No., in order of birth  6. Legitimate? yes 7. Date of birth August 12 1925  
Month Day Year

8. FATHER  
Full name Rufus B. Abbott  
9. Residence (Usual place of abode) Miami, Ariz  
If non-resident, give place and state.  
10. Color or race White  
11. Age at last birthday 37 (Years)  
12. Birthplace (city or place) Calhoun  
(State or country) Georgia  
13. Occupation Millman  
Nature of Industry Copper mine

14. MOTHER  
Full maiden name Nellie Bee Wilton  
15. Residence (Usual place of abode) Miami, Arizona  
If non-resident, give place and state.  
16. Color or race White  
17. Age at last birthday 29 (Years)  
18. Birthplace (city or place) El Paso  
(State or country) Texas  
19. Occupation Housewife  
Nature of Industry

20. Number of children of this mother 2  
(Taken as of time of birth of child herein certified and including this child.)  
(a) Born alive and now living 2  
(b) Born alive but now dead 0  
(c) Stillborn 0  
21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was alive at 3:50 a m. on the date above stated  
(Born alive or stillborn.)

\* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.  
Signature J. E. Miller  
mid  
(Physician or midwife)

Given name added from 213-812-545 Address Miami, Ariz  
a supplemental report. Month, day, year

Filed Aug 23, 1925 Registrar C. E. Davis

\* just an initial: has no middle name